

DOOR COUNTY APPLICATION FOR EMPLOYMENT

Door County is an Equal Opportunity Employer. We consider applicants for all positions without regard to race, color, religion, sex, national origin, sexual preference, age, martial status, pregnancy, disability, or any other legally protected status.

MAIL APPLICATION MATERIALS TO:

Door County Human Resources Dept

421 Nebraska Street Sturgeon Bay, WI 54235

Phone: (920) 746-2305 Fax: (920) 746-2538

e-mail: hr@co.do or.wi.us

Door County reserves the right to test all applicants for jobrelated skills. For certain positions, a pre-employment physical examination and drug testing may be required. Deadline: Friday, August 20, 2010 - 4:30 p.m.

Thank you for your interest in employment with Door County. Please read the following instructions carefully:

- This application is to be filled out by the applicant only. If you are physically unable to complete this form, or need other assistance in the hiring process, reasonable accommodations may be requested.
- Incomplete or illegible applications will not be considered. Résumés will be accepted as a supplement to the application form, but will not substitute for it.
- If more space is needed, please indicate this on the application form and attach the additional paper to the application.

		PERSONAL	INFORMATIO	ON				
Position Applied I		Department:			Date Available:			
LTE Bridge Tenders		I.	Door County					
Last Name:			Lighway Dept First Name:	•	Middle Name:			
. Dast Hame.								
•						State: ZIP:		
Street Address	:		City:			State: ZIP:		
				ļ				
Home Phone:	Worl	Phone:	May we contact	t you at work?	k? What Hours?			
			Yes	No	,			
E-Mail Address:		т	ype of Employmen		(check all th	hat apply)		
E-Man Address:		Full-Tim	_	Seasonal	Casual	Intern	LTE	
Are you at least 18 years of age? (Employment may be subject to verification that you meet state and federal								
minimum age requirements. Employees under 18 shall have a work permit.)						Yes	No	
Are you a United States citiz	en, or do vou	have papers from	the U.S. governmen	nt permitting yo	ou to work?			and the same of th
Are you a United States citizen, or do you have papers from the U.S. government permitting you to work? (Verification will be required at the time of employment.)							Yes	No
Are you able to perform all of the duties listed in the position description, with or without reasonable								
accommodation?							Yes	No
Have you ever been convic	ted of a felony	? (If the answer i	s "ves", please expl	ain at the end o	of this applica	ation		
Have you ever been convicted of a felony? (If the answer is "yes", please explain at the end of this application form. A "yes" answer does not necessarily disqualify an applicant.)						Yes	Ν̈́ο	
			TORY - PAR		1	7.0		"
A "yes" answer to any of the following questions does not necessarily disqualify an applicant from the selection process. If you answer "yes" to any of the following questions, please provide an explanation at the end of this application form.								
							Yes	No
Have you ever been suspended, terminated, discharged or resigned to avoid being discharged?						103		
Have you ever been disciplined for attendance problems in your current or previous employment?						Yes.	No	
Are there any gaps in employment in excess of thirty (30) days?						Yes	No	
Have you ever been employed by Door County?						Yes	. No	

	EDUCAT	TON P.	TRAINING			
		High Sch	Location of High Scho	nl:	Gradus	ated?
Highest Level Completed:			. Docation of High Sens		Yes No	
9 10 11 12 [GED/HSED]					105	
			was d Wigh School			
Educ	ation & Tra	Dates Dates		Deg	ree erred &	
Name & Location of Institution:	From:	To:	Major Field of St	ıdy: Gl	PA Conte	
	110					
·						
Relevant coursework:	5-					
1 - 1-10						
Additional skills and/or training:						
·Professional licensures/certifications & Ex	piration Dates:					
	Πp	IVER'S L	TCENSE			
Please refer to the position description for the	position for wh	ich you are a	pplying. <u>If business trave</u>	l and/or driver's li	censing is requ	uired, plea
Please rejer to the position acces iphonyo.					complete	this sectio
Do you have access to an automobile?					Yes	No
	DL#				Yes	No
Do you have a valid Wisconsin driver's If the position requires, do you have a valid	license? Iid Wisconsin C	Commercial I	Priver's license (CDL)?		Yes	No
If yes, please list endorsements:						
Do you have, or can you make arrangem liability insurance requirements on your	ents to obtain, in	nsurance cov	erage meeting the County ner person: \$300,000 per	's minimum accident bodily	Yes	No
injury; \$50,000 per accident property da	mage; or \$300,0	000 combined	single limit)			
· List any moving violations within the pr	evious five (5) y	ears:				
	Bacero	CTONAL	REFERENCES			
Please provide us with four (4) references that				ations, skills, and/o	or educational	
Please provide us with four (4) references that background. Please do not submit names of rel	atives, spouses,	or significan	others.			
Name				of Relationshi	р	
	-		,			

WORK HISTORY - PART B

Please complete this section in its entirety. Give a complete record of any employment, self-employment, military service or volunteer experience you have had in the past 10 years. Please include positions beyond the 10 year period if they are related to the position for which you are applying. Start at the top with your present or most recent job. Indicate any change in job title under the same employer as a separate position. You may attach your resume as a supplement to the information you provide in the application. Please note that it is the policy of Door County to contact an applicant's current employer only after that applicant has been deemed a finalist for a position.

Employer Name:			Position Tit	Type of Business:			
Address and phone of Business (Street, City, ZIP, telephone & fax #):			Reason for Lea	Name, Title & Phone of Supervisor:			
, ,							
Employmen From:	To:	Start Salary:	Ending Salary:	ling Salary: Hours per Week:		May we contact, prior to an offer of employment? Yes No	
Description of Dutie						<u></u>	
Description of Dutie							
· ·							-
	. I N		Position Titl	e:		Type of Bu	siness:
Em)	ployer Name:		Tostdon 110		*3%** *** *****************************		
Address and phone of Business (Street, City, ZIP, telephone & fax#))	Reason for Lea	Name, Title & Phone of Supervisor:			
	Employment Dates: Start Salary:		Ending Salary: Hours per		Week: Is this employer still in business?		
From:	To:			-	Yes		No
Description of Duties:							
Ton	ployer Name:		Position Tit	le:		Type of Bu	siness:
Em	ployer Ivanie.		T OMAGN. AMAG				
Address and phone of Business (Street, City, ZIP, telephone & fax#)		9)	Reason for Leaving:		Name, Title & Phone of Supervisor:		
Employmen	ıt Dates:	Start Salary:	Ending Salary:	Hours per	Week:	Is this employ	er still in business?
From:	To:	Start Salary.	2	Yes Yes		No	
Description of Duti	es:	1					
							•

EXPLANATION(S) / S	SUMMARY IN	<u>FORMATION</u>			
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	n.				
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REFERRAL SOURCE (PLEASE P	ROVIDE D ET	AIL WHEN POSSIBLE)			
Newspaper:	Employee:				
Employment Agency:	Web Site:	Web Site:			
Bulletin Board:	Professional Journal:				
Walk-in:	Job Service:				
Other:					
	•	•			
In order for your application to b	ne considere	d. you must complete the			
Employment Application A	Affidavit / In	formation Release.			
DOOR COUNTY PERSON	NNEL DEPART	MENT USE ONLY			
DOOK COOK LEGG		Date Received:			
:					
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EMPLOYMENT APPLICATION AFFIDAVIT / INFORMATION RELEASE

I hereby certify that all statements made on or in connection with this application are true, complete and correct to the best of my knowledge and belief. I understand and agree that any misstatements, false information, or omissions of material fact herein subjects me to disqualification or dismissal. I further understand that my classification as a regular employee depends upon successfully performing work assigned to me during a probationary period, where applicable. I also understand that regular attendance is required of me as a condition of continued employment.

I understand and agree that all information furnished in this application may be verified by Door County. I also understand that any offer of employment is conditional subject to a satisfactory check of references and satisfactory results of a background check, drug screen when required, and any other required examinations.

I understand that Door County may conduct a check on my background to verify the information I have furnished in my application for employment, which may include, but not be limited to, information from previous employers, references, school records, driving records, and any criminal records.

I hereby voluntarily and knowingly authorize and request any current or former employer, educational institution, law enforcement agency, or other persons or organizations having personal knowledge about me to furnish Door County with any and all information in their possession regarding me, in connection with an application for or retention of employment. Further, I hereby release from liability or responsibility all persons, companies and corporations supplying such information. Copies of this document will be considered as valid as an original thereof.

Name (Printed or Typed):	Signature:	Date:
	·	,
OPEN RECORT	DS DISCLOSURE (OPTIONAL	_)
This section is optional: Under section 19.36 must be open to public inspection. The stat name revealed prior to being a "final candidated and the section of the section o	ute also provides that if an ap	plicant does not want his/her
Accordingly, I hereby request that my employ remain confidential to the extent allowed by V	ment application and all related Wisconsin Statutes.	references and documents
N (Deinted on Torond):	Signature*	Date:

THANK YOU FOR COMPLETING THIS APPLICATION AND FOR YOUR INTEREST IN EMPLOYMENT WITH DOOR COUNTY.

Signature:

Name (Printed or Typed):

DOOR COUNTY BACKGROUND CHECK & EQUAL EMPLOYMENT OPPORTUNITY INFORMATION DISCLOSURE FORM

Door County is an Equal Opportunity Employer. We consider applicants for all positions without regard to race, color, religion, sex, national origin, sexual preference, age, marital status, pregnancy, disability, or any other legally protected status.

The following information is needed for the following purposes:

- To complete various government reports and implement equal employment opportunity and affirmative actions programs.
- To monitor and prevent discrimination on the basis of race, color, religion, sex, national origin, sexual
 preference, age, marital status, pregnancy, disability, or any other legally protected status.
- To facilitate and conduct the necessary background checks for pre-employment screening. These may include, but are not limited to the following: caregiver background checks; criminal records checks; driver's licensing checks; credential and educational verifications; and other necessary background investigations.

The information furnished on this form will not and legally cannot be used adversely against an applicant for employment, except that age, sex, and physical or mental ability may be considered when relevant to the position for which you are applying. This document will not be kept with the employment application, and will not be shared with those individuals involved in the interview process. It shall be maintained as a confidential record of the Personnel Department.

Please S	Supply The Fol	lowing Inform	nation			
Last Name:	First Name:			Middle Name		
Position Applied For:	Date of Birth:		Are you 4	40 years of age or older? No		
Maiden Name (If Applicable):	Social Security Number:		Sex:			
			Male	/ Female		
-	Race: (Please	Check One)				
American Indian/Native American (including Alaskan Natives)		African Ame	African American or African origin			
Asian		Hispanic/Lat	Hispanic/Latino			
White not of Hispanic origin	Native Hawaiian or Pacific Islander					
Other						
	Disabilit	y:				
The Americans with Disabilities Act (ADA) desimpairment that substantially limits one or more manual tasks, walking, caring for oneself, learning regarded as having such an impairment." Based	e major life activities ing, thinking or work	[such as hearing, see ing], has a record of	eing, speaking, bro such an impairm	eathing, performing		

The completion of the "Door County Background Check & Equal Employment Opportunity Information Disclosure Form" is voluntary, and there will be no adverse consequences for not completing this form.